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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Kazunori SAITOH, et al.

GROUP ART UNIT:

SERIAL NUMBER: 08/893,759

EXAMINER:

FILED: July 11, 1997

FOR: IMMUNOASSAY



INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. 1.97

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Applicant(s) wish to disclose the following information.

REFERENCES

- ☒ The Applicant(s) wish to make of record the references cited in the attached European Search Report listed on the attached Form PTO-1449. Copies of the listed references are attached, where required, as are either statements of relevancy or any readily available English translations of pertinent portions of any non-English language references.
- ☐ A check is attached in the amount required under 37 CFR § 1.17(p).

RELATED CASES

- ☐ Attached is a list of applicant's pending applications or issued patents which may be related to the present application. A copy of the patent(s) is attached along with PTO 1449.
- ☐ A check is attached in the amount required under 37 CFR § 1.17(p).

CERTIFICATION

The undersigned certifies that

- ☒ each item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.
- ☐ no item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application or, to the knowledge of the undersigned, having made reasonable inquiry, was known to any individual designated in 37 CFR § 1.56(c) more than three months prior to the filing of this statement.

PETITION

- ☐ Applicant(s) hereby request consideration of the attached information. A check is attached in the amount of the Petition fee required under 37 CFR § 1.17(i)(1).

DEPOSIT ACCOUNT

- ☒ Please charge any additional fees for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to deposit account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

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